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ABSTRACT

This digest focuses on issues of parallel process in supervision. The concept of parallel process has its origin in the psychoanalytic concepts of transference, when the counselor recreates the presenting problem and emotions of the therapeutic relationship within the supervisory relationship, and countertransference, when the supervisor responds to the counselor in the same manner that the counselor responds to the client. Parallel process, then, is defined as that which occurs when the supervisory interaction replays, or is parallel with, the counseling interaction. Types of parallel process are identified and ways for the supervisor to respond to parallel process are discussed. Suggestions also are given for when supervisors should respond to parallel process. The digest concludes that the supervisor should always be aware of how the therapeutic relationship and client issues are presented by the counselor in the supervisory session, and that if the parallel process is not worked through in supervision, both the supervisory and therapeutic relationships will suffer. Contains 8 references. (NB)

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ERIC CLEARINGHOUSE ON Counseling And Student Services

ERIC DIGEST

April 1994 EDO-CG-94-15

Parallel Process in Supervision

Marie B. Sumerel

Introduction

The concept of parallel process has its origin in the psychoanalytic concepts of transference and countertransference. The transference occurs when the counselor recreates the presenting problem and emotions of the therapeutic relationship within the supervisory relationship. Countertransference occurs when the supervisor responds to the counselor in the same manner that the counselor responds to the client. Thus, the supervisory interaction replays, or is parallel with, the counseling interaction.

Transference and countertransference are covert behaviors. Identifying their occurence requires an acute and on-going awareness of one's own issues and the events that trigger the issues. But awareness of oneself is only the first step. Using the awareness as an intervention in facilitating growth in the counselor, and thus helping the client, is the ultimate goal.

Types of Parallel Process

Originally, parallel process was perceived to begin only as transference, when the counselor acted out the client's issues in supervision. Searles (1955) made the first reference to parallel process, labeling it a reflection process. He suggested that "processes at work currently in the relationship between patient and therapist are often reflected in the relationship between therapist and supervisor" (p. 135). Searles believed that the emotion or reflection experienced by the supervisor was the same emotion felt by the counselor in the therapeutic relationship. Although Searles recognized that the supervisor's reactions also might be colored by his/her past, this was not the focus of the reflection process.

Several hypotheses exist for why the counselor may exhibit the reflection process. First, the counselor may look inward for similarities between himself/herself and his/her client as a means to develop a therapeutic strategy that is appropriate, thus tapping into the same issue as that of the client. Secondly, counselors may overidentify with their clients and be uncertain of how to proceed with therapy (Russell, Crimmings, & Lent, 1984). Wanting the supervisor to feel the same feelings they had experienced with the client, the counselor unconsciously recreates the problem experienced in the therapeutic relationship in an effort to get the supervisor to model appropriate responses or make suggestions for resolution of the problem (Mueller & Kell, 1972).

Doehrman (1976) believed that Searles' (1955) reflective process was too limited in scope. In a classic study, she found that parallel process could be bidirectional. In fact, all four therapists in her study identified with their supervisor to the point of playing (or paralleling) their supervisor with their clients. In psychoanalytic terms, this form of parallel process is countertransference. Several scenarios can be drawn to relate how this may occur. First, the supervisor may believe a discussion of the supervisor's or counselor's emotions are not appropriate for supervision but should be addressed in the counselor's personal therapy sessions. The supervisor, however, responds unconsciously to the counselor's emotions and the counselor responds in the same way with the client, thereby creating the parallel process. Secondly, the supervisor may impose his/her values on the counselor who then imposes the values on the client. Third, supervisors who are inexperienced and have not accepted their role as teacher/supervisor may act out their discomfort with the counselor in the supervisory relationship. The counselor, then, exhibits discomfort in the therapeutic relationship with the client. Finally, the supervisor may become impatient with the counselor in the supervisory relationship. The parallel occurs when the counselor exhibits the impatience he/she felt with the supervisor in the therapeutic relationship with the client.

How should supervisors respond to parallel process?

Several authors (e.g., Doehrman, 1976; Loganbill, Hardy, & Delworth, 1982; Stoltenberg & Delworth, 1987) believe that it is important to the quality of supervision to respond to the parallel process when it is observed. They have asserted that examination of parallel processes encourage counselor growth. In fact, Doehrman (1976) found that only when the parallel process was resolved did the clients improve.

Supervision need not be only a teaching process that emphasizes theories and techniques (Ekstein & Wallerstein, 1972). Supervision can provide an experience for counselors to learn how to use themselves in the counselor/client relationship. By discussing the parallel process in supervision, the counselor will become aware of how oneself is involved in the therapeutic and supervisory relationships.

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When should supervisors respond to parallel process?

Authors of developmental models (Loganbill et al., 1982; Stoltenberg & Delworth, 1987) suggest that the timing for discussing parallel process issues is important. They indicate that beginning counselors do not possess the self-awareness and insight needed to deal with transference and countertransference issues. Unaware of how they may impact the therapeutic relationship, they are more concerned with learning techniques and skills. When transference issues are discussed, beginning counselors may become defensive and experience an increase in anxiety. Doehrman (1976), for instance, reported that the only entry-level counselor in her study was not able to gain insight into the transference and countertransference issues in supervision and, therefore, terminated training.

McNeill and Worthen (1989), however, indicated that discussion of parallel process issues could occur with entry level counselors. They suggested that the interventions should be simple and concrete, and focus primarily on self-awareness issues. Giving specific examples that are obvious in the supervisory and therapeutic relationships help the counselor understand the dynamics that are occurring. The specificity reduces the counselor's anxiety and provides a framework in which learning and self-awareness can occur.

More advanced and experienced counselors, on the other hand, have developed a capacity to understand and absorb self knowledge gained through transference and countertransference reactions in their therapeutic relationships (Loganbill et al., 1982; McNeill & Worthen, 1989; Stoltenberg & Delworth, 1987). Advanced counselors are less defensive with regard to their issues and identity becoming the focus in supervision and, therefore, are more inclined to discuss how these issues are affecting the therapeutic relationship. They have developed therapeutic skills and techniques and have the capacity to address more advanced and conceptual issues such as parallel process.

Even though advanced counselors are more interested in discussing the transference and countertransference issues, however, supervisors can overemphasize the parallel process to a point that is exhausting for the counselor (McNeill & Worthen, 1989). Therefore, how and when the parallel process interventions are used is important to their success in facilitating growth and self-awareness in the counselor. Supervisors must exhibit caution, as there is a proclivity to cross the line from a supervisory relationship to a therapeutic relationship when parallel process issues are discussed.

Conclusion

Doehrman (1976) found a form of parallel process in each of the supervisory relationships she studied, therefore implying that it is a universal phenomenon. She posited that the supervisor should always be aware of how the therapeutic relationship and client issues are presented by the counselor in the supervisory session. If the parallel process is not worked through in supervision, both the supervisory and therapeutic relationships will suffer.

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